## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

## **Provider Inspection Summary**

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: SMITH FAMILY HOME (690085)

Address: 10477 HOPE TRAIL, AUBURNDALE, WI 54412

**License Status: REGULAR** 

Licensed/Certified/Registered 10/23/1997

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

**Survey History** 

Survey ID: 0094906 End Date: 05/18/2005 Type: STANDARD Purpose: SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090976 End Date: 09/02/2003 Type: OTHER Purpose: VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED